

INTERPRETATION OF TUBERCULIN SKIN-TEST RESULTS

<p>A. ≥5mm is positive for:</p> <ul style="list-style-type: none"> . Recent close contacts of persons with active TB . Persons with HIV infection . Persons with fibrotic CXR consistent with healed TB . Organ transplant recipients and other immunosuppressed patients 	<p>B. ≥10mm is positive for persons who do not meet the criteria in A. and who belong to one or more of the following:</p> <ul style="list-style-type: none"> . Injecting-drug users . Persons with other medical conditions reported to increase risk of progressing from latent to active TB (see list in Group 2 box) . Residents/employees of high-risk congregate settings (i.e. correctional institutions, nursing homes, homeless shelters, drug & alcohol treatment centers, healthcare facilities) . Persons recently arrived from countries having high prevalence of TB (e.g., ≤ 5 years since arrival) . Medically underserved, low-income populations . Locally identified high-risk groups . Children of any age exposed to adults in high-risk categories 	<p>C. ≥15mm is positive for persons who do not meet any of the criteria in A. or B.</p> <p>NOTE: In general, these persons should not be tested unless required for occupational health reasons, e.g. health care workers.</p>
<p>ANERGY</p> <ul style="list-style-type: none"> . Anergy testing is poorly standardized or can be selective (e.g. anergy or reactivity to mumps or candida may not reliably predict anergy or ability to respond to PPD). . Should not be routinely used as part of screening for TB even in HIV infected patients. 	<p>BOOSTER EFFECT</p> <ul style="list-style-type: none"> . Persons with TB infection may have negative PPD when tested many years after infection . Initial PPD may stimulate (boost) ability to react to PPD . Positive reactions to subsequent tests may be misinterpreted as new infection . See Two-Step Testing 	<p>TWO-STEP TESTING</p> <p>For baseline skin testing of adults who will be retested periodically to distinguish boosted reactions from reactions due to new infections:</p> <ul style="list-style-type: none"> . If first test is (+), consider person infected at baseline . If first test (-), give second test 1-3 weeks later . If second test (+), consider person infected at baseline . If second test (-), consider person uninfected at baseline

REFERENCES

1. Centers for Disease Control and Prevention. Targeted Tuberculin Testing and Treatment of Latent Tuberculosis Infection. MMWR 2000; 49:RR-6.
2. American Thoracic Society/CDC. Diagnostic Standards and Classification of Tuberculosis in Adults and Children. Am J Respir Crit Care Med 2000; 161:1376-1395.
3. CDC. Core Curriculum on Tuberculosis. Fourth Edition. DHHS, 2000.
4. AST/CDC. Treatment of Tuberculosis and Tuberculosis Infection in Adults and Children. Am J Resp Crit Care Med 1994;149:1359-1374.